

**COMBINED DECLARATION
AND POWER OF ATTORNEY**

(Original, Design, National Stage of PCT or CIP Application)

As the below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COIL FORM

the specification of which: (complete (a), (b) or (c) for type of application)

Regular or Design Application

(a) [] is attached hereto.
(b) [] was filed on _____ as Application Serial No. _____ and as amended on _____ (if applicable).

PCT Filed Application Entering National Stage

(c) [X] was described and claimed in International Application No. PCT/CH2003/000231 filed on April 9, 2003 (if applicable).

Acknowledgment of Review of Papers and Duty of Candor

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the subject matter claimed in this application in accordance with Title 37, Code of Federal Regulations § 1.56.

[X] In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.97.

Priority Claim

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed

(complete (d) or (e))

(d) [] no such applications have been filed.
(e) [X] such applications have been filed as follows:

PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

COUNTRY APPLICATION NO.	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
PCT/CH02/00545	October 1, 2002		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
ALL FOREIGN APPLICATION[S], IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION			
			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

Claim for Benefit of Prior U.S. Provisional Application(s)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date

Continuation-In-Part
(complete this part only if this is a continuation-in-part application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)

POWER OF ATTORNEY

As the sole named inventor, I hereby appoint Thomas D. MacBlain, Reg. No. 24,583, Donna H. Catalfio, Reg. No. 55,973 and Kaare D. Larson, Reg. No. 51,920, of the firm of GALLAGHER & KENNEDY, P.A., with offices at 2575 East Camelback Road, Phoenix, Arizona 85016 as attorneys and agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:

Thomas D. MacBlain
GALLAGHER & KENNEDY, P.A.
2575 East Camelback Road
Phoenix, AZ 85016-9225

DIRECT TELEPHONE CALLS TO:

Thomas D. MacBlain
GALLAGHER & KENNEDY, P.A.
(602) 530-8088

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	<u>Pilniak</u>	<u>Jurgen</u>		
RESIDENCE & CITIZENSHIP	CITY <u>59581 Warstein/Allagen</u>	STATE or FOREIGN COUNTRY <u>Germany</u>	COUNTRY OF CITIZENSHIP <u>Germany</u>	
POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Udenstrasse 11</u>	CITY <u>59581 Warstein/Allagen</u>	STATE or COUNTRY <u>Germany</u>	ZIP CODE
DATE <u>04. July 2005</u>	SIGNATURE OF INVENTOR 			

FULL NAME OF FIRST INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	<u>Peck</u>	<u>Joachim</u>		
RESIDENCE & CITIZENSHIP	CITY <u>59494 Soest</u>	STATE or FOREIGN COUNTRY <u>Germany</u>	COUNTRY OF CITIZENSHIP <u>Germany</u>	
POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Bergstrasser Weg 1</u>	CITY <u>59494 Soest</u>	STATE or COUNTRY <u>Germany</u>	ZIP CODE
DATE <u>04. July 2005</u>	SIGNATURE OF INVENTOR 			